

Special Care Unit

Licensing and Scope of Service Guidelines

I. Scope and Applicability

In the event of an outbreak of influenza, or other natural or unnatural disaster, which precipitates a sudden and/or severe influx of patients requiring hospital care that is substantially greater than the hospital's capacity to provide care (hereinafter "Event"), then a Specialty Care Unit (SCU) may be activated to provide surge capacity for hospital patients or for victims/casualties resulting from the Event. For planning and preparedness purposes, the SCU activated to provide supportive care to flu patients will be termed the "Influenza Specialty Care Unit (ISCU)." Hospitals shall agree to follow the guidelines set forth below to the extent possible based on the resources, materials, and equipment available to implement and operate an ISCU for Pandemic Influenza response. The Hospital, in working with and as approved by the Massachusetts Department of Public Health (MDPH) may propose specific planning for other SCUs to respond to other potential scenarios, as well as other procedures or guidelines for operating the hospital specific ISCU.

The hospital agrees to take all appropriate actions during a Pandemic without regard to race, color, creed, national origin, age, sex, gender orientation, religion, or handicap, and to work with its local community and local service providers as necessary. There shall be no cause of action or basis of liability for breach of these guidelines by the Hospital or MDPH.

These guidelines are not intended to replace the Hospital's current disaster plan or to adversely affect existing transfer agreements between hospitals and other service providers. Instead, these guidelines are intended to outline the procedures for the licensure and operation of an ISCU, as identified by a hospital pursuant to the "Application for DPH Licensure Approval of Emergency Influenza Specialty Care Unit." Each hospital shall incorporate these guidelines, and all related checklists, community-hospital Memorandum of Agreement, and other related documents into its disaster plan consistent with the principles contained herein.

II. Licensing

The Hospital will submit an application to MDPH to license the ISCU as a satellite facility under its license. The requirements for licensing approval are included in the application and accompanying checklist distributed to all hospitals by MDPH's Division of Health Care Quality Circular Letter DHCQ 06-7-463, dated July 14, 2006. Once approved, the ISCU license will become effective for a period of three (3) years. Renewal of the ISCU license, hospital policies, and any related hospital-community MOA shall be required at the end of the three year for successive three year periods.

III. Activation and Inactivation

- A. An ISCU will be deemed ready for activation upon the completion of the following.
 - a. MDPH approval of the submitted license application, with accompanying checklist. Site visits are not required for licensing approval, but MDPH reserves the right to conduct a site visit as deemed necessary, before or after the ISCU application has been approved.
 - b. A signed MOU between the Hospital and the ISCU Facility.
 - c. An operations plan for the first 36 hours of operation to include: appropriate staffing on a 24-hour basis for the 36 hour operational period; sufficient resources (medical equipment and supplies) as determined by the onsite Director of Medical Operations; provision of essential services (food, hygiene, life safety); and adequate security of the site.
- B. The responsibilities of both the Hospital and MDPH in preparing for activation of the ISCU are as follows.
 - a. MDPH is responsible for approving the license application, the completed checklist, and the initial operations plan.
 - b. The Hospital is responsible for determining the readiness of the operations plan for the first 36 hours of operations.
- C. The process to activate the ISCU will be as follows.
 - a. Either MDPH or the Hospital may request activation. The activation request will be submitted to the Commissioner of MDPH or his/her designee for review and approval.
 - b. Both the Hospital and MDPH must agree that the ISCU is ready to activate before the Commissioner will grant the Hospital authorization to activate the ISCU. Both MDPH and the Hospital will take all necessary steps to open the ISCU within forty eight (48) hours of receiving authorization to activate it.
- D. The process to inactivate the ISCU will be as follows.
 - a. Either the hospital or MDPH may request inactivation due to decreased surge capacity needs. The inactivation request will be submitted to the Commissioner of MDPH or his/her designee for review and approval.
 - b. The Hospital may request inactivation of the ISCU in the event that patient safety is unable to be assured due to inadequate staffing, inadequate supplies, or any other serious concern.
 - c. MDPH may inactivate the ISCU at any time due to patient safety concerns, or in order to redistribute scarce resources.

IV. Reimbursement and Liability

The hospital may seek reimbursement for patient care provided during the activation and operation of the ISCU pursuant to the hospital's applicable credit and collection policies or through available public or private resources. The Hospital recognizes and agrees that it shall be responsible for covering the costs required in providing the patient care, as well

as covering the operational costs of the facility in which the ISCU is situated. Such operational costs shall include, but not be limited to, utilities and supplies that are used during the ISCU activation and operation. The hospital shall coordinate with the facility in which the ISCU is situated to ensure appropriate property, casualty, and other insurance is provided. The hospital and the facility shall develop and provide an appropriate notice to any volunteers that provide services to the ISCU indicating that their services shall neither be compensated nor covered by any general liability or workers compensations insurance coverage. The hospital and facility shall further not be liable for any resources or supplies provided by a public or private entity to run the ISCU, pursuant to an understanding that such resources and supplies are freely given.

MDPH and the hospital agree to provide documentation that may be necessary in seeking reimbursement for expenses from the Massachusetts Emergency Management Agency, the Federal Emergency Management Agency, and any other public or private entity. The hospital, MDPH, and the facility in which the ISCU exists, recognize that the costs and expenses outlined above may not be known before or immediately after the activation of the ISCU.

Should provisions for protection from liability for individual health care providers, the Hospital, or the facility be deemed nonexistent or insufficient when the ISCU activation is requested, the hospital or MDPH may decide not to activate the ISCU.

V. Staffing

At all times when the ISCU is activated, the Hospital will provide a Director of Medical Operations on site on a 24/7 basis. The Hospital will also provide an Administrator on site during standard business hours and 24/7 access to an Administrator on Call.

Prior to activation of the ISCU, the Hospital will identify a Staffing Coordinator. This role may be filled by the Hospital, the local health department, a Medical Reserve Corps, or other agency, organization or entity that satisfies the Hospital requirements for the position. The Staffing Coordinator will work to pre-identify potential local staffing resources, will develop the staffing plan for the first 36 hours of operation prior to activation of the ISCU, and will maintain a staffing plan for each 48 hour operational period throughout operation of the ISCU.

MDPH will specify the minimum appropriate staff required to operate the ISCU. These staffing requirements may be different from what would be required under normal circumstances, and may vary during the Event to reflect statewide, regional, and local conditions. In the event that the Staffing Coordinator is unable to secure appropriate staff for the ISCU for any operational period, the Staffing Coordinator may request assistance from the Massachusetts System for Advance Registration (MSAR) through MDPH.

The Staffing Coordinator will notify MDPH in the event that staffing is inadequate and no further local staffing is available. MDPH will ensure that a person is on call 24/7 to respond to notifications and inquiries from the Staffing Coordinator.

VI. Supplies and Equipment

MDPH intends to supply medical beds, oxygen concentrators, and other necessary equipment and supplies to establish the ISCU. The Hospital will provide any additional disposables, supplies, and/or pharmaceuticals as is deemed necessary while the ISCU is open. A full description of items to be supplied by MDPH is provided in the checklist that accompanies the licensing application.

VII. Points of Contact

The Hospital, facility, and MDPH will each designate a primary ISCU point of contact and a staffing point of contact. These contacts must be available 24/7, and may be designated as a particular position rather than an actual individual.

VIII. Continuity and Termination

The hospital shall conduct periodic reviews to ensure that it is able to meet the requirements outlined in these guidelines. Either the Hospital, MDPH, or the facility may terminate the ISCU licensure by giving 120 days written notice to the other Participant of its intentions to terminate. These guidelines are in no way meant to affect any of the rights, privileges, titles, claims, or defenses provided under federal or state law, or common law.